

# BEST AVAILABLE COPY

## CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

### CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
4						
5						
6			1			
7						
8						
9						
10						
11						
12						
13						
14						
15						
16			1			
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48						
49						
50						
TOTAL IND.	1		2			
TOTAL DEP.	4		21			
TOTAL CLAIMS	5		23			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS